Name in Full | Certificate of Death

Thomas Benson

Died at Town Templeville County Queen Anne MARYLAND

Date 1900 Month 2 Day 6 Age Y. 95 M. – D. – Native of Del Occupation Laborer

Male ~~White~~ Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ ~~Number of children~~ living X

Husband ~~Wife~~ of Frances Benson

Father's Name | Mother's Name

Cause of Death: Primary La Grippe 9 | How long sick 5 wks

Immediate Exhaustion | ~~Accident, Suicide, Homicide~~

Reported by J. E. Gollen M.D.

Address Templeville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name in Full Saul Bolden

Certificate of Death

Died at Town Winchester County Queen Ann MARYLAND

Date ~~189~~ 19 00 Month Feb Day 10 | Age Y. 5 M. D. | Native of Md | Occupation

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single Widow Widower Divorced Number of children living

Husband of Wife

Father's Name Saul Bolden

Mother's Name Susan Marsh

Cause of Death: Primary Pheumonia

Immediate

How long sick 6 days

Accident, Suicide, Homicide

Reported by Chas Corkey

Address Queenston Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Hellen Chesser

Certificate of Death

Died at Town: Fords Store County: Q.A. MARYLAND

Date 1900 Month: Feb Day: 11 Age Y. — M. — D. 7 Native of: Q.A. Co. Md Occupation: —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children~~ living

Husband / Wife of —

Father's Name: Geo Chesser

Mother's Name: Jennie Dodd

Cause of Death: Primary: Inherited Syphilis 24 — How long sick: 7 days

Immediate: Hemorrhage from mucous tracts — ~~Accident, Suicide, Homicide~~

Reported by: Chas. F. Davidson

Address: Queenstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65[illegible]

Name in Full

Certificate of Death

Susie May Coursey

Town

Died at Queenstown

County

Q.A.

MARYLAND

Date 1900 Month Feb Day 28

Age Y. 4 M. 9 D. —

Native of Q.A. Co Md

Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single Widower ~~Number of children living~~

Husband / Wife of —

Father's Name Saml C. Coursey

Mother's Name Lollie Coursey

Cause of Death — Primary Laryngismus Stridulus — How long sick 77

Immediate asphyxia — ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Dr. Chas. F. Davidson,

Address D Queenstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Susan Green

Town

County

Died at Alms House Queen Annes MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1900 Feb.	4th	Age 70			2-A.Co	Pauper

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single Widower Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death: Primary — old age — 1dy — How long sick

Immediate

Accident, Suicide, Homicide

Reported by C. A. Hoskins

Address Centreville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, REORD

Name in Full: Eliza Della Gross

Certificate of Death

Died at: Town: Centreville County: Q. Annes MARYLAND

Date: 1900 Feb 6 - 14 Month Day Age: Y. 1 M. 11 D. 00 Native of: Md Occupation: —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single Widower Number of children living

Husband / Wife of: — —

Father's Name: Robert Gross Mother's Name: Clara Gross

Cause of Death: Primary: Influenza How long sick: 3 mos.

Immediate: Pneumonia ~~Accident, Suicide, Homicide~~

Reported by: A D Troy M D

Address: Centreville

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Jeremie Gross

Certificate of Death

Died at Town Centreville County Queen Annes MARYLAND

Date ~~1910~~ 1900 Month Feb Day 14 Age Y. 17 M. — D. Native of Md Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ Number of children living One

Husband of Wife

Father's Name Robt Gross Mother's Name Clara Gross

Cause of Death Primary Childbirth How long sick 2 wks

Immediate Pneumonia ~~Accident, Suicide, Homicide~~

Reported by W D Perry MD

Address Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Frances Hall

Certificate of Death

Died at Town Ingleside County Q. A. Co MARYLAND

Date 1900 Month 2 Day 12 Age Y 42 M. D. Native of Md Occupation washer woman

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 10

Husband / Wife of Mat Hall

Father's Name

Mother's Name 97

Cause of Death: Primary Bright Disease — How long sick 4 yrs

Immediate Dropsy — Accident, Suicide, Homicide

Reported by J. E. Graham M.D.

Address Ingleside Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968

Name in Full Never Named

Certificate of Death

Died at Town Centreville County Q. A. MARYLAND

Date 1900 Month 2 Day 13 Age Y. 5 M. D. Native of Occupation

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name John Johnson

Mother's Name

Cause of Death Primary Croup 8a

Immediate Choked to death

How long sick Few Minutes

Accident, Suicide, Homicide

Reported by Dawson & Whiteley

Address Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

No Doctor.

Information from

charles Bareus

Centreville

Mich

Name in Full

Certificate of Death

Fannie E. Legg

Died at Town: near Ruthsburg County: Queen Anne MARYLAND

Date 1900 Month: Feb Day: 7 Age Y.: 25 M.: 7 D.: 13 Native of: Md Occupation:

~~Male~~ Female White ~~Colored~~ ~~Married~~ Single Widow ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband / Wife of

Father's Name: James Legg

Mother's Name: Fannie Richardson

Cause of Death: Primary: Phthisis 220

Immediate: Exanstion

How long sick: 1½ years

~~Accident, Suicide, Homicide~~

Reported by: Walter H. Tenby

Address: Ruthsburg Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mrs Sarah Moore

Certificate of Death

Died at Town Cumberland County Allegany MARYLAND

Date 1900 Month 2 Day 28 | Age Y. 83 M. D. | Native of Md | Occupation none

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~

Number of children living 7

Husband of —

Wife

Father's Name —

Mother's Name —

Cause of Death: Primary — Organic Heart trouble — How long sick 2 yrs

Immediate

Accident, Suicide, Homicide

Reported by J. M. Borsteau M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Thomas Nichols

Died at Town: Alms House | County: Queen Annes | MARYLAND

Date 1900 | Month: Feby | Day: 12 | Age Y. M. D.: 76. | Native of: Q. A. Co | Occupation: Pauper

Male | ~~White~~ | ~~Married~~ | ~~Widow~~ | ~~Divorced~~

~~Female~~ | Colored | Single | ~~Widower~~ | ~~Number of children living~~

Husband of Wife

Father's Name | Mother's Name

Cause of Death: Primary: Paralysis 44 | How long sick: 2 months

Immediate: Old age | Accident, Suicide, Homicide

Reported by: Jas Halton attending Physician

Address: Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65963

Name in Full

Mrs. Annie Prince

Certificate of Death

Died at Town: Fords Store County: Q. A. Co MARYLAND

Date 1900 Month: Feb Day: 18 | Age Y. 25 M. — D. — | Native of Delaware | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~

Number of children living 3

~~Husband~~ Wife of Wm Prince 118

Father's Name Jas A. Dailey

Mother's Name Hennie ~~Dailey~~ Cole

Cause of Death: Primary Ruptured Uterus during Labor | How long sick 27 hrs.

Immediate Shock & Hemorrhage | Accident, Suicide, Homicide

Reported by Chas. F. Davidson MD

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full James Seward

Certificate of Death

Died at Town Templeville County Queen Anne MARYLAND

Date 19 00 Month 2 Day 8 | Age Y. 88 M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | Married | Single | Widow | Widower | Divorced | Number of children living

Husband of

Wife

Father's Name

Mother's Maiden Name

Cause of Death { Primary 8 Fall | Immediate 152a

How long sick

Accident, Suicide, Homicide

Reported by Denton Journal 2-10-1900

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70708

Name in Full — Certificate of Death

Thomas Smith

Died at near Centreville (Town) Queen Anns (County) MARYLAND

Date 1900 Month 2 Day 20 | Age Y. 68 M. D. | Native of Md | Occupation Laborer

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | Divorced | Number of children living —

Husband of —
Wife

Father's Name —

Mother's Name — 90

Cause of Death — Primary: Cirrhosis of Liver — How long sick 1 year

Immediate: general dropsy — ~~Accident, Suicide, Homicide~~

Reported by Jas F Dordley

Address Centreville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full James Holland Thomas

Certificate of Death

Died at Town Ruthsburg County Queen Anne MARYLAND

Date Died Month Feb Day 24 | Age Y. 5 M. 1 D. 9 | Native of Md | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number of children living

Husband of Wife

Father's Name Lewis H. Thomas

Mother's Name Minnie A. Johnson

Cause of Death: Primary Bronchitis 69 How long sick 1 month

Immediate Pneumonia ~~Accident, Suicide, Homicide~~

Reported by Walter H. Tenby

Address Ruthsburg Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full

Bradford Nickerson White

Certificate of Death

Died at Kent Island (Town) Queen Annes (County) MARYLAND

Date 1900 Month Feb Day 13 | Age Y. 9 M. 11 D. 13 | Native of Md. | Occupation Laborer

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | Widow ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of ~~Wife~~

Father's Name Eli White | Mother's Name Hester White

Cause of Death: Primary Auto-Intoxication | How long sick 2 days

Immediate Convulsions | ~~Accident, Suicide, Homicide~~

Reported by C. Percy Kemp, M.D.

Address Kent Island Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888